

# Child Marriage in Kazakhstan (Summary)



As a 15-year-old, you want to live and take joy in life, like all your peers. My friends and I wanted to finish school, go to university, complete our studies, start working, and, of course, marry for love. I didn't know it would be like this.

It's difficult to talk about. How would you like washing floors every day, cleaning the house, never going out, and never talking to anyone?

—Child spouse

## Legal context

Kazakhstan has ratified both the UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Convention on the Rights of the Child (CRC).

Under the Republic of Kazakhstan's Marriage and Family Code, in order for a marriage to be contracted, both the would-be spouses must voluntarily agree to the marriage, and both must be at least 18 years old. This minimum marriage age can be reduced by two years by civil registration authorities if there are 'good reasons' for doing so (e.g. pregnancy), with the agreement of both spouses and their parents or guardians (Article 10). Only marriages registered with the civil registration authorities are legally recognised.

Forcing minor girls into marriage without their consent and kidnapping them with the intention of forcing them into marriage are criminal offences. Kazakhstan's criminal code envisages a prison sentence of eight to ten years for kidnapping (Article 125). However, in cases of bride kidnapping, the following article can be applied: 'Persons who voluntarily release the abductee are absolved of criminal responsibility if in this action they did not commit another offence'. Under Article 122 of the Criminal Code of the Republic of Kazakhstan, sexual intercourse, and other activities of a sexual character involving persons under 16 years of age can lead to up to five years' deprivation of liberty.

Under Kazakhstan's laws, a child is a person who is under 18 years of age, although if an adolescent marries legally at 16 or 17, he or she obtains full legal capacity.

## Family planning and reproductive rights

According to national legislation, full legal capacity is reached at the age of 18, including in regard to accessing medical treatment. Even though the age of consent is 16, adolescents under the age of 18 cannot access sexual and reproductive health services and advice without permission from their parents or guardians. This practice limits the access of young people to sexual and reproductive health services, and reduces the effectiveness of youth-friendly clinic services.

*In Kazakhstan, child marriages are rare, but do occur in certain communities and among some ethnic groups, particularly in rural areas. Child marriage is linked to social and cultural norms in these communities, as well as to poverty.*



Girls under 18 who are officially married do obtain full legal capacity, meaning that they can obtain medical treatment and access reproductive health and family planning services. However, this research revealed that in practice, married girls often have to obtain permission from their husbands and/or mothers-in-law to visit a clinic.

A survey carried out in Kazakhstan in 2011 found that young people in Almaty and southern Kazakhstan had little knowledge of contraception and usually did not make informed decisions about family planning in the first years of marriage. The survey indicated that adolescents are beginning their sex lives early, in the context of low contraceptive use, and an inadequate number of specialised medical, consultative, and psychological services and sex education programmes for adolescents. This is particularly the case for adolescents living in rural areas and small towns.

All of the child spouses who participated in this research indicated that they did not know what contraception is. Even after the birth of their second child, in most cases they were not planning pregnancies. In cases of child marriage, the husband's relatives expect the birth of a child in the first year of marriage. If the first child is a girl, traditional preference for boys compels women to continue getting pregnant until a boy is born. Only then will the family agree for the woman to exercise her right to family planning.

### Child marriage in Kazakhstan

Today in Kazakhstan, reliable statistical data are only available with regard to *de jure* marriages, i.e. those registered with the civil registration authorities. However, child marriages tend to be *de facto* marriages, either unregistered religious marriages, or where a couple cohabit. As such, it is not possible to know exactly how many people are married before the age of 18.

The official data that is available relates to registered marriages of adolescents aged 16–18. The Youth of Kazakhstan statistical yearbook for 2010 indicated that the number of female child spouses that had contracted registered marriages was more than 20 times higher than the number of male child spouses, indicating that child marriage in Kazakhstan is a gendered phenomenon.

Rates of registered child marriages were also higher in poorer parts of the country. However, the problem of child marriage in Kazakhstan is not just linked to economic factors. Other important influences include social and cultural factors, as well as the educational attainment of the women and girls, and their residence in a rural area. It should also be noted that child marriage is most often found among population groups that follow the Islamic faith, and is more frequent among certain minority ethnic groups. However, child marriage is also practised, to a lesser degree, among the majority ethnic Kazakh population (0.64 per cent of all married ethnic Kazakh women are minors). Among the ethnic European population (mainly Russians), child marriage also occurs (1.2 per cent of married Russian females are minors), usually as a result of early, unplanned pregnancy.

The Multiple Indicator Cluster Survey (MICS) for the Republic of Kazakhstan (2010-11) showed that women respondents who had married at a young age were more likely to agree that a husband has the right to beat his wife or partner in certain situations, such as 'transgressions' in childcare or housework or refusal to have sexual intercourse. These respondents were also more susceptible to domestic violence.

### Child marriage in Almaty oblast

In order to study child marriage in more detail, statistical data from Almaty oblast were analysed, and interviews carried out with child spouses and local experts. The data indicated that married girls aged 15–19 made up 4.8 per cent of all married women in Almaty oblast, and 3.1 per cent of births recorded there were to girls in this age range.

In Almaty oblast, child marriages remain a hidden phenomenon, supported by social and cultural stereotypes that prevail among the rural population. The practice is most typical among minority ethnic groups in the oblast, though during the research we also discovered cases of child marriage among Kazakhs. In districts where minority ethnic groups (Turks, Uighurs, Dungans, and others) live together, as well as in several Kazakh communities, stereotypes still predominate concerning the subordinate status of women in families, and the complete subjection of daughters to their parents' will. At the same time, economic factors also influence some parents'

decisions to arrange early marriages for their children, as this gives them access to the *kalym* (bride price) that they will receive from the groom's family on their daughter's marriage.

In these districts, there is a widespread view that child marriage is encouraged under Sharia law, and many child marriages are registered with imams. However, according to a representative of the Spiritual Administration of Muslims of Kazakhstan, Islam categorically forbids any discrimination against girls and women.

In communities where child marriage is practised, child spouses who were interviewed explained that adolescent girls are told that it is normal, as 'that's the way all women in our family and our people get married'.

The statements made by respondents who had married early suggested they had suffered many problems in their married lives. These included neglect and violence from husbands, mothers-in-law, and other members of the husbands' families. There was also constant housework, isolation, and a lack of communication with the outside world, friends, and even their own parents. More often than not the female child spouse was treated as a person without rights, and was not even allowed to think about studies or work. It was assumed that she should serve the family – her husband's relatives – in an unquestioning way, and if she refused or resisted, she was subjected to physical violence or humiliation. This research found that rape in child marriages is common. Though they are rare, cases of suicide occur, as recounted by a civil servant interviewed for this research.

In rural areas, usually there is simply nowhere for a child spouse to go to seek assistance and support; moreover, a child spouse is not able to do so, as she is left isolated. Even when cases of violence are made public, often the victims are not protected and the perpetrators go unpunished.

The situation is aggravated in most cases by the onset of health problems associated with early pregnancy and motherhood.

If a relationship breaks down, women who are not officially married face difficulties acquiring documents for property, and they cannot apply for child support if they do not establish paternity. Though national legislation allows for establishment

of paternity, in practice this is very difficult to achieve.

In cases of bride kidnapping, according to experts, few victims seek help from law enforcement agencies, and criminal cases are very rarely brought against perpetrators. Even when a victim and her family do go to the police, usually they withdraw their complaints. This may be because the victim is intimidated, and fears social condemnation from her community.

## Responses to child marriage

**Improving adolescent health.** The National Centre for Problems of Healthy Lifestyle Development has prepared a report, 'Health of adolescents in the Republic of Kazakhstan', that raises issues of mortality and suicide among adolescents. Reasons for this, among other issues, include adolescents' unpreparedness for pregnancy and childbirth, associated with the problem of child marriages. At the 1<sup>st</sup> Adolescent and Youth Forum, held in 2011, participants discussed reproductive health, suicide, and other social and medical problems.

**Online resources.** There are websites in operation on youth reproductive health: [www.zhas.kz](http://www.zhas.kz) and [www.ypeerastana.kz](http://www.ypeerastana.kz), which are available in the Russian and Kazakh languages and are supported by the UN Population Fund (UNFPA), as well as the site [www.Y-peer.kz](http://www.Y-peer.kz). However, they are not always accessible to adolescents living in rural areas as many do not have computers or access to the internet.

## Recommendations

- Develop mechanisms to improve enforcement of laws criminalising sexual contact with persons under 16 years of age, rape, and corruption of minors, and kidnapping.
- Increase adolescent girls' awareness of their human and civil rights, with a particular focus on: protection from violence; the fact that payment of *kalym* (bride price) does not confer a legal obligation on the girl and her family in relation to the husband and his family; and the status of marriage and the family.
- Provide support to ethnic minority communities to overcome customs that harm the development and health of girls and violate girls' rights by conducting communications activities to protect the rights of girls.
- In the education system, introduce educational programmes on the protection of sexual and reproductive health of adolescents and youth. In addition, counselling methods for adolescents on sexual and reproductive health and family planning should be improved, as should access to free contraceptives. Finally, access of pregnant girls and minor mothers to medical, legal, educational, and social services should be facilitated.
- Introduce changes to national legislation to lower the age at which adolescents are able to receive the full range of medical assistance without the consent of parents or legal guardians, and ensure the confidentiality of medical services provided. Procedures should be developed for referral by healthcare professionals of patients who have physical and/or psychological conditions, which have been caused by or could have been caused by domestic violence, to psychologists and to social services.
- Carry out periodic expert surveys of the prevalence of child marriage in order to generate reliable data across the country.



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